

BEST AVAILABLE COPY

MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/572535

CLAIMS

AS FILED

AFTER
1ST AMENDMENT

AFTER
2ND AMENDMENT

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IND. DEP.

IND. DEP.

IND. DEP.

TOTAL IND.

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TOTAL DEP.

DEP.

DEP.

DEP.

TOTAL CLAIMS

IND.

IND.

IND.

AS FILED

AFTER
1ST AMENDMENT

AFTER
2ND AMENDMENT

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TOTAL IND.

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TOTAL DEP.

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TOTAL CLAIMS

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